The Liberia Malaria Indicator Survey (LMIS) was implemented from 4 October to 12 December 2022 by the National Malaria Control Program (NMCP) and the Liberia Institute of Statistics and Geo-Information Services (LISGIS). The funding for the 2022 LMIS was provided by the U.S. President's Malaria Initiative (PMI) and The Global Fund to Fight AIDS, Tuberculosis and Malaria (The Global Fund). ICF provided technical assistance through The DHS Program, a USAID-funded project that provides support and technical assistance in implementing population and health surveys in countries worldwide.

The main objective of the 2022 LMIS is to provide information on malaria prevention, treatment, and prevalence in Liberia.

The current report presents a table summarizing the levels of selected key malaria indicators at the national level and for six constructed regions of study: Greater Monrovia, North Western, South Central, South Eastern A, South Eastern B, and North Central. A more detailed and comprehensive analysis of the 2022 LMIS data will be presented in the final report.

Additional information about the 2022 LMIS may be obtained from the headquarters of National Malaria Control Program, Ministry of Health, Tubman Boulevard, Oldest Congo Town; P.O. Box 10-9009 1000 Monrovia, 10 Liberia; phone: +231 77754 2708, +231 77756 4071; email: michealsb2012@gmail.com; dlevi30@gmail.com.

Information about The DHS Program may be obtained from ICF, 530 Gaither Road, Suite 500, Rockville, MD 20850, USA (telephone: +1-301-407-6500; fax: +1-301-407-6501; email: info@DHSprogram.com; internet: www.DHSprogram.com.

The contents of this report are the sole responsibility of the NMCP and ICF and do not necessarily reflect the views of PMI, the United States Government, or The Global Fund.

Recommended citation:

National Malaria Control Program (NMCP), and ICF. 2023. *Liberia Malaria Indicator Survey 2022. Key Indicators Table*. Monrovia, Liberia, and Rockville, Maryland, USA: NMCP and ICF.



Republic of Liberia

Liberia Malaria Indicator Survey (LMIS)

Key Indicators

2022

National Malaria Control Program, Ministry of Health Monrovia, Liberia

> The DHS Program Rockville, Maryland USA

> > March 2023





KEY MALARIA INDICATORS FROM THE LIBERIA 2022 MALARIA INDICATOR SURVEY

National Malaria Control Program (NMCP) and Liberia Institute of Statistics and Geo-Information Services (LISGIS), fieldwork was conducted from October 2022 through December 2022. Total number of households surveyed: 4,306 households; total number of de facto women surveyed: 4,513

	REGION						
Malaria indicator	National	Greater Monrovia	North Western	South Central	South Eastern A	South Eastern B	North Central
INSECTICIDE-TREATED NETS (ITN) ¹							
Percentage of households with at least one ITN	72.1	51.1	72.2	77.7	79.8	85.2	89.2
Percentage of households with at least one ITN for every two persons who stayed in the household last night	32.7	21.9	39.2	28.6	41.8	37.8	42.8
Percentage of children under age 5 who slept under an ITN last night	50.0	40.8	46.9	46.8	47.1	53.2	58.7
Percentage of pregnant women age 15-49 who slept under an ITN last night	52.5	23.7	34.4	65.6	57.4	48.0	71.0
Percentage of the de facto population with access to an ITN ²	52.3	35.4	57.1	51.0	60.5	59.6	65.8
Percentage of the de facto household population who slept the night before the survey under an ITN in households owning at least one ITN	57.4	51.5	53.8	53.2	57.8	48.0	65.4
INTERMITTENT PREVENTIVE MALARIA TREATMENT DURING P	REGNANCY						
Percentage of women age 15-49 with a live birth in the 2 years preceding the survey who, during the pregnancy preceding the last birth, received two or more doses of SP/Fansidar	79.9	74.7	85.7	79.7	87.9	91.8	79.2
Percentage of women age 15-49 with a live birth in the 2 years preceding the survey who, during the pregnancy preceding the last birth, received three or more doses of SP/Fansidar	62.6	55.2	73.7	61.9	71.7	82.6	61.2
PREVALENCE, DIAGNOSIS, AND PROMPT TREATMENT OF CHI	LDREN WITH FEVER						
Among children under age 5 with fever in the 2 weeks preceding the survey, percentage for whom advice or treatment was sought ³	60.4	54.4	62.4	59.4	63.1	78.1	60.2
Among children under age 5 with fever in the 2 weeks preceding the survey, percentage who had blood taken from a finger or heel for testing	44.8	45.7	58.0	39.5	63.6	53.6	35.8
Among children under age 5 with fever in the 2 weeks preceding the survey who took any antimalarial medication, percentage who took an ACT ⁴	77.4	66.2	70.9	76.2	82.7	85.2	86.5
MALARIA PARASITEMIA							
Percentage of children age 6-59 months with a positive rapid diagnostic test ⁵ (RDT) result	17.7	4.1	19.5	17.3	23.4	32.8	22.2
Percentage of children age 6-59 months with a positive result through microscopy	10.3	0.7	11.6	11.3	13.1	18.5	13.3

¹ An insecticide-treated net (ITN) is a factory-treated net that does not require any further treatment. In the 2016 LMIS, 2013 LDHS, and 2011 LMIS, this was known as a long-lasting insecticidal net (LLIN).

² Percentage of de facto household population who could sleep under an ITN if each ITN in the household were used by up to two people.

³ Includes advice or treatment from the following sources: public sector, private sector, non-governmental organization sector (NGO), shops and markets, and black baggers/drug peddlers. Excludes advice or treatment from a traditional practitioner.

⁴ ACT = artemisinin-based combination therapy

⁵ RDT = rapid diagnostic test (Abbott Malaria Ag P.f)